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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir/Madam:

Transm	nitted herewith for filing is the patent application of Jessop, et al for MEDICAL		
MAGING MA	RKER comprising pages of specification and claims.	•	
. 🛛	This non-provisional application claims priority to U.S. application no. 60/416,0)92 t	filed

	October 5, 2002.				•
Enclo	sed also are:				•
	4 sheet(s) of drawings.				. ·
\boxtimes	Applicant claims small entity st	atus und	ler 37 CF	R 1.9(b) &	1.27(c).
<u> </u>	An Assignment, with cover she	et, from	the inver	ntors to	•
	Declaration and Petition.				
	Power of Attorney.		1 1 x		
	A Preliminary Amendment is en	nclosed.			

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Information Disclosure Statement under 37 C.F.R. § 1.97, PTO Form-1449 with listed references attached (if indicated as being attached by the Information Disclosure Statement).

The filing fee has been calculated as shown below.

			SMALL ENTINES		OULIAR TELEMAN A SYMULL.		
FOR	NO. FILED	EXTRA	RATE	FEE	RATE	FEE	
BASIC FEE			\$385.00	\$385.00	\$770.00		
TOT. CLAIMS	-20=	0	x \$9.00 =		x \$18.00 =		
IND. CLAIMS	-03=	0	x \$43.00 =		x \$86.00 =	· · · · · · · · · · · · · · · · · · ·	
MULTIPLE DEPE CLAIMS PRESEN		0	\$145.00		\$290.00		
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A check in the amount of _____ is enclosed to cover the filing fee.

The Commissioner is hereby authorized to charge any additional fees associated with this communication or to credit any overpayment to Deposit Account No. 20-0100. Please address all future correspondence in connection with the above-identified patent application to the attention of the undersigned.

Dated this 6th day of October, 2003.

Respectfully submitted,

Attorney for Applicant Registration No. 36,947

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CWT/: /ja Enclosures

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